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## TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number	09/937,182
Filing Date	January 18, 2002
First Named Inventor	Pier Giuseppe Pellicci
Art Unit	1653
Examiner Name	Robert A. Wax
Attorney Docket Number	0380-P02669US0

Total Number of Pages in This Submission

### ENCLOSURES (Check all that apply)

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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DANN, DORFMAN, HERRELL AND SKILLMAN - Customer No. 000110		
Signature			
Printed name	Kathleen D. Rigaut, Ph.D., J.D.		
Date	November 20, 2006	Reg. No.	43,047

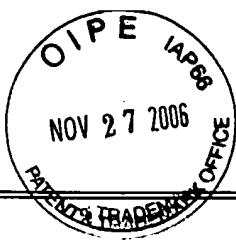
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## FEE TRANSMITTAL

		<i>Complete if known</i>	
		Patent Application No. 09/937,182	
		Filing Date: January 18, 2002	
		First Named Inventor: Pier Giuseppe Pelicci	
		Group Art Unit: 1653	
Examiner Name: Robert A. Wax			
Total Amt. of Payment: (1)+(2)+(3)= <u>\$795</u>		Attorney Docket Number: 0380-P02669US0	

<u>METHOD OF PAYMENT</u> (check one)		<u>FEE CALCULATION (continued)</u>																					
1. The Commissioner is hereby authorized to: <input type="checkbox"/> Charge indicated fees <input checked="" type="checkbox"/> Charge additional fees <input checked="" type="checkbox"/> Credit overpayments to the account of DANN, DORFMAN, HERRELL & SKILLMAN Deposit Account Number <u>04-1406</u>		<b>ADDITIONAL FEES</b> <b>Fee Description</b> <b>Fee Paid</b> Surcharge-late filing fee or oath _____ Surcharge - late provisional filing fee or cover sheet _____ Extension for response within <u>four</u> months _____ <u>795.00</u> Notice of Appeal _____ Filing a brief in support of an appeal _____ Request for oral hearing _____ Petition to revive unavoidably abandoned application _____ Petition to revive unintentionally abandoned application _____ <b>Issue Fee</b> _____ Petitions to the Commissioner _____ Petitions related to provisional applications _____ Submission of Information Disclosure Stmt. _____ Recording each patent assignment per property _____ Other fee (specify) _____																					
2. Payment enclosed: Check in the amount of \$ _____  <b>FEE CALCULATION</b> 1. <b>FILING FEE</b> <b>Fee</b> <b>Fee Description</b> <b>Fee</b> Utility filing fee _____ Design filing fee _____ Plant filing fee _____ Reissue filing fee _____  <b>SUBTOTAL (1)</b> _____		<b>SUBTOTAL (3)</b> <u>\$795</u>																					
2. <table> <thead> <tr> <th></th> <th><b>Paid</b></th> <th><b>Extr</b></th> <th><b>Fee</b></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>-</td> <td>= 0</td> <td>x = 0</td> </tr> <tr> <td>Independent Claims</td> <td>-</td> <td>= 0</td> <td>x = 0</td> </tr> <tr> <td>Multiple Dependent (First presentation)</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="4"><b>SUBTOTAL (2)</b> <u>\$0</u></td> </tr> </tbody> </table>					<b>Paid</b>	<b>Extr</b>	<b>Fee</b>	Total Claims	-	= 0	x = 0	Independent Claims	-	= 0	x = 0	Multiple Dependent (First presentation)				<b>SUBTOTAL (2)</b> <u>\$0</u>			
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Independent Claims	-	= 0	x = 0																				
Multiple Dependent (First presentation)																							
<b>SUBTOTAL (2)</b> <u>\$0</u>																							

Submitted By:

Typed or

Printed Name Kathleen D. Rigaut, Ph.D., J.D. Reg. Number 43,047 Deposit Account User ID

Signature Kathleen D. Rigaut Date November 20, 2006 04-1406